

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SF		10-01-01
O.I.P.E. CLASSIFIER			10/10-5-01
FORMALITY REVIEW	H.T.	1117	11/05/01
RESPONSE FORMALITY REVIEW			

09/9646471

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
■	Allowed	I	Interference
-	(Through numeral)... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	4/1
Original	3/1
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Claim	Date
Final	51
Original	52
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Claim	Date
Final	101
Original	102
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If more than 150 claims or 10 actions  
staple additional sheet here

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